FORM NO. 2

United States Bankruptcy Court Western District of Tennessee

In re	Jackie Jerome Hart				Case No.			
			Debtor(s)		Chapter	13		
CHAPTER 13 PLAN								
		(INDIVIDU	JAL ADJUSTMENT	OF DEBTS)				
DEBTO	OR(S):	(H) Jackie Jerome	Hart	S	.S.# xxx-	xx-4976		
		(W)			.S.#			
ADDR	ESS:	175 Tate Rd.						
		Dyersburg, TN 38024						
PLAN	PAYMENT:	94.00	(weekly , e	very two wee	ks, semi-m	onthly, r	monthly)	
PAYRO	OLL DEDUCTION:	YES OR () DIRECT PAY						
		BECAUSE:						
		FIRST PAYMENT	DATE:					
PLACE OF EMPLOYMENT: ADMINISTRATIVE:		Marvin Windows						
		Pay filing fee, Trustee's fee, and debtor's attorney fee, pursuant to Court Order.						
		•		•				MONTHLY
								PLAN PMT.
AUTO	INSURANCE:	() Not included i	n Plan () Included	in Plan			\$_	-NONE-
CHILD	O SUPPORT:	Future support through Plan to				_	\$_	-NONE-
		Child support arrearage amount				_	\$	
PRIOR	LITY CREDITORS:	-NONE-				_	\$	-NONE-
HOME	MORTGAGE:	If no arrearage, ongoing payments are to be paid directly by the debtor(s).						
								debtor acts as disbursing
Saxon 1	Mortgage Services, Inc.	Ongoing pmt. Begi	n N/A				\$	agent
		Approx. arrearage	N/A	Interest	N/A	- %	\$	N/A
SECUE	RED CREDITORS;	1.pprom unrounuge	VALUE		TE OF	_ ′°	Ψ_	MONTHLY
	en 11 U.S.C. Sec. 1325{a}{5})	(COLLATERAL		EREST			PLAN PMT.
HSBC/	Suzuki	\$				%	\$	surrender
Ally Fin	ancial	\$	5,009.00		8.00	- %	\$	108.00
LINICE	CLIDED CDEDITODS:	Absort a specific cou	et order otherwise, all	l alaima othar t	han thaga (- enocifical	ly prov	idad for abova
UNSECURED CREDITORS: Absent a specific court order otherwise, all claims, other than those specifically provided f shall be paid as general unsecured debts. Percentage to be paid to be determined by Trusto								
*HSBC/Suzuki;Center for Adult Healthcare;Dell Financial Services;Dyersburg Regional Medical Center;Dyersburg Regional Medical								
Center; Enhanced Recovery Co., LLC; Forrest Kenton Busch, D.O. P.C.; GE Money Bank- JC Penney; GE Money Bank-							ioriai Modicai	
Lowes;I	ndependent Radiology Asso	ociates, PLC;Indeper	ndent Radiology Asso	ciates, PLC;Ind				ciates, PLC;
*Indicates t	he unsecured portion of a Secured Clair	n, the nonpriority portion of a	Priority Claim, or an avoided S	Secured Claim.				
ESTIM	ATED TOTAL UNSECUE	RED. NON-PRIORIT	TY DEBT: \$7,437.0	0				
	INATION:	Plan shall terminate upon payment of the above, approximately 60 months.						
IEKWI	INATION:	Pian shan termina	te upon payment of the	ne above, appro	ximatery <u>o</u>	<u>o</u> monus	S.	
OTHE	R PROVISIONS:							
	Payroll deduction:							
	Marvin Windows							
	101 Marvin Dr.							
Ripley, TN 38063								
Chapter 13 Trustee is authorized to make the following monthly payments for adequate protection: Ally Financial \$27.00								
FAILURE TO FILE TIMELY WRITTEN OBJECTION TO CONFIRMATION WILL BE DEEMED ACCEPTANCE OF PLAN.								E OF PLAN
Tribeta 10 The Thinest with the objection to confiding tion when the bediefied accelerance of Team.								

Robert B. Vandiver, Jr. DEBTOR'S ATTORNEY:

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